

Patient has signs suggestive of ischemia or infarction

<b>EMS ASSESSMENT, CARE, AND HOSPITAL PREPARATION</b>	① <b>MONITOR &amp; SUPPORT ABC'S</b> > Prepare to provide CPR or defibrillate if needed	④ <b>STEMI RESPONSE</b> > Notified hospital should mobilize hospital resources
	② <b>ADMINISTER ASPIRIN</b> > Consider oxygen, nitroglycerin, and morphine	⑤ <b>COMPLETE FIBRINOLYTIC CHECKLIST</b> > If considering prehospital fibrinolysis, use fibrinolytic checklist
	③ <b>OBTAIN 12-LEAD ECG: INTERPRET/TRANSMIT</b> > If ST elevation, note time of onset and first medical contact and notify receiving hospital.	

<b>CONCURRENT ED ASSESSMENT (&lt;10 MINUTES)</b>	• CHECK VITAL SIGNS & OXYGEN SAT	• START OXYGEN > At 4 L/min, titrate if O <sub>2</sub> sat <90%	<b>IMMEDIATE ED GENERAL TREATMENT</b>
	• ESTABLISH IV ACCESS	• ADMINISTER ASPIRIN > 160 to 325 mg (if not given by EMS)	
	• BRIEF HISTORY & PHYSICAL	• ADMINISTER NITROGLYCERIN > Sublingual or spray	
	• OBTAIN INITIAL CARDIAC MARKERS > And initial electrolyte and coagulation studies	• ADMINISTER MORPHINE IV > If nitroglycerin doesn't relieve discomfort	
	• PORTABLE CHEST X-RAY (<30 MIN)		

